PHA Plans

Streamlined Annual Version

U.S. Department of Housing and **Urban Development**

OMB No. 2577-0226

 $(\exp. 08/31/2009)$

Office of Public and Indian Housing

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937 that introduced 5-year and annual PHA Plans. The full PHA plan provides a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form allows eligible PHAs to make a streamlined annual Plan submission to HUD consistent with HUD's efforts to provide regulatory relief for certain types of PHAs. Public reporting burden for this information collection is estimated to average 11.7 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect

Privacy Act Notice. The United States Department of Housing and Urban Development, Federal Housing Administration, is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Information in PHA plans is publicly available.

this information and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Streamlined Annual PHA Plan for Fiscal Year: 2008

PHA Name: Southwest Acadia Housing

Authority

NOTE: This PHA Plan template (HUD-50075-SA) is to be completed in accordance with instructions contained in previous Notices PIH 99-33 (HA), 99-51 (HA), 2000-22 (HA), 2000-36 (HA), 2000-43 (HA), 2001-4 (HA), 2001-26 (HA), 2003-7 (HA), and any related notices HUD may subsequently issue.

Streamlined Annual PHA Plan Agency Identification

| PHA Name: Southwest Ac | adia Hou | ising Authority | PHA Number | r: L091 |
|---|--|---|---|----------------------------|
| PHA Fiscal Year Beginnin | g: (mm/ | yyyy) 10/2008 | | |
| PHA Programs Administe Public Housing and Section Number of public housing units: Number of S8 units: | 8 Se | | Iblic Housing Onl er of public housing units | |
| PHA Consortia: (check b | ox if subr | nitting a joint PHA P | lan and complete | table) |
| Participating PHAs | PHA Code | Program(s) Included in the Consortium | Programs Not in the Consortium | # of Units Each Program |
| Participating PHA 1: | | | | |
| Participating PHA 2: | | | | |
| Participating PHA 3: | | | | |
| Name: Ken Guidry TDD: Public Access to Informati Information regarding any act (select all that apply) PHA's main administrati | on ivities out | _ | | |
| — Display Locations For PH | A Plans | _ | | |
| The PHA Plan revised policies of public review and inspection. If yes, select all that apply: Main administrative office PHA development manage Main administrative office Public library PHA Plan Supporting Document | Yes ee of the P gement off ee of the lo PHA | No. HA Fices ocal, county or State general website | overnment Other (list belov | v) |
| Main business office of the Other (list below) | | | oment managemen | |

PHA Name: Southwest Acadia Housing Authority

HA Code: LA091

Streamlined Annal PHA Plan

Fiscal Year 2008

[24 CFR Part 903.12(c)]

Table of Contents

[24 CFR 903.7(r)]

Provide a table of contents for the Plan, including applicable additional requirements, and a list of supporting documents available for public inspection.

A. PHA PLAN COMPONENTS

| | 1. | Site-Based Waiting List Policies | |
|-------------|-----------|---|-----|
| 903 | .7(b)(2) | Policies on Eligibility, Selection, and Admissions | |
| \boxtimes | 2. | Capital Improvement Needs | -5 |
| 903 | .7(g) Sta | atement of Capital Improvements Needed | |
| | 3. | Section 8(y) Homeownership | |
| 903 | .7(k)(1) | (i) Statement of Homeownership Programs | |
| | 4. | Project-Based Voucher Programs | |
| \boxtimes | 5. | PHA Statement of Consistency with Consolidated Plan. Complete only if PHA has | |
| | ch | anged any policies, programs, or plan components from its last Annual Plan | -7 |
| \boxtimes | 6. | Supporting Documents Available for Review | |
| \boxtimes | 7. | Capital Fund Program and Capital Fund Program Replacement Housing Factor, | |
| | Aı | nnual Statement/Performance and Evaluation Report | -12 |
| \boxtimes | 8. | Capital Fund Program 5-Year Action Plan | -15 |
| \boxtimes | 9. | Final Capital Fund Program Statement 2005 | -18 |
| \boxtimes | 10 | . Final Capital Fund Program Statement 2006 | -21 |
| | 11 | . Performance & Evaluation Report CFP ending 6/30/2008 | 24 |
| \boxtimes | 12 | 2. Attachment 1: Violence Against Women Act | 27 |

B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE

Form HUD-50076, *PHA Certifications of Compliance with the PHA Plans and Related Regulations*: *Board Resolution to Accompany the Streamlined Annual Plan* identifying policies or programs the PHA has revised since submission of its last Annual Plan, and including Civil Rights certifications and assurances the changed policies were presented to the Resident Advisory Board for review and comment, approved by the PHA governing board, and made available for review and inspection at the PHA's principal office;

For PHAs Applying for Formula Capital Fund Program (CFP) Grants:

Form HUD-50070, Certification for a Drug-Free Workplace;

Form HUD-50071, Certification of Payments to Influence Federal Transactions; and

Form SF-LLL &SF-LLLa, Disclosure of Lobbying Activities.

1. Site-Based Waiting Lists (Eligibility, Selection, Admissions Policies)

[24 CFR Part 903.12(c), 903.7(b)(2)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. Site-Based Waiting Lists-Previous Year

1. Has the PHA operated one or more site-based waiting lists in the previous year? If yes, complete the following table; if not skip to B.

| Site-Based Waiting Lists | | | | | | | |
|---|-------------------|---|--|---|--|--|--|
| Development Information: (Name, number, location) | Date Initiated | Initial mix of Racial, Ethnic or Disability Demographics | Current mix of Racial, Ethnic or Disability Demographics since Initiation of SBWL | Percent change between initial and current mix of Racial, Ethnic, or Disability demographics | | | |
| | | | | | | | |
| | | | | | | | |

| 2. | What is the number of site based waiting list developments to which families may apply |
|----|--|
| | at one time? |
| | |

3. How many unit offers may an applicant turn down before being removed from the site-based waiting list?

| 4. | Yes No: Is the PHA the subject of any pending fair housing complaint by HUD |
|----|--|
| | or any court order or settlement agreement? If yes, describe the order, agreement or |
| | complaint and describe how use of a site-based waiting list will not violate or be |
| | inconsistent with the order, agreement or complaint below: |

B. Site-Based Waiting Lists – Coming Year

If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to next component.

1. How many site-based waiting lists will the PHA operate in the coming year?

2. Yes No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)? If yes, how many lists? 3. Yes No: May families be on more than one list simultaneously If yes, how many lists? 4. Where can interested persons obtain more information about and sign up to be on the sitebased waiting lists (select all that apply)? PHA main administrative office All PHA development management offices Management offices at developments with site-based waiting lists At the development to which they would like to apply Other (list below) 2. Capital Improvement Needs [24 CFR Part 903.12 (c), 903.7 (g)] Exemptions: Section 8 only PHAs are not required to complete this component. Α. **Capital Fund Program** 1. \boxtimes Yes \square No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete items 7 and 8 of this template (Capital Fund Program tables). If no, skip to B. 2. \square Yes \bowtie No: Does the PHA propose to use any portion of its CFP funds to repay debt incurred to finance capital improvements? If so, the PHA must identify in its annual and 5-year capital plans the development(s) where such improvements will be made and show both how the proceeds of the financing will be used and the amount of the annual payments required to service the debt. (Note that separate HUD approval is required for such financing activities.). В. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund) Applicability: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement. 1. Yes No: Has the PHA received a HOPE VI revitalization grant? (if no, skip to #3; if yes, provide responses to the items on the chart located on the next page, copying and completing as many times as necessary).

PHA Name: Southwest Acadia Housing Authority

HA Code: LA091

2. Status of HOPE VI revitalization grant(s):

| | HOPE VI Revitalization Grant Status | | | | |
|-----------------------------|---|--|--|--|--|
| a. Development Name | | | | | |
| b. Development Num | ber: | | | | |
| Revitalizat Revitalizat | ion Plan under development ion Plan submitted, pending approval ion Plan approved bursuant to an approved Revitalization Plan underway | | | | |
| 3. | Does the PHA expect to apply for a HOPE VI Revitalization grant in the Plan year? If yes, list development name(s) below: | | | | |
| 4. Yes No: | Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year? If yes, list developments or activities below: | | | | |
| 5. Yes No: V | Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement? If yes, list developments or activities below: | | | | |
| | ant Based AssistanceSection 8(y) Homeownership Program | | | | |
| (if applicable) [24 CF | FR Part 903.12(c), 903.7(k)(1)(i)] | | | | |
| 1. | Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "No", skip to the next component; if "yes", complete each program description below (copy and complete questions for each program identified.) | | | | |
| 2. Program Description: | | | | | |
| a. Size of Program Yes No: | Will the PHA limit the number of families participating in the Section 8 homeownership option? | | | | |
| | If the answer to the question above was yes, what is the maximum number of participants this fiscal year? | | | | |
| b. PHA-established e | eligibility criteria | | | | |

HA Code: LA091 Yes No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria? If yes, list criteria: c. What actions will the PHA undertake to implement the program this year (list)? 3. Capacity of the PHA to Administer a Section 8 Homeownership Program: The PHA has demonstrated its capacity to administer the program by (select all that apply): Establishing a minimum homeowner downpayment requirement of at least 3 percent of purchase price and requiring that at least 1 percent of the purchase price comes from the family's resources. Requiring that financing for purchase of a home under its Section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards. Partnering with a qualified agency or agencies to administer the program (list name(s) and years of experience below): Demonstrating that it has other relevant experience (list experience below): 4. Use of the Project-Based Voucher Program **Intent to Use Project-Based Assistance** Yes No: Does the PHA plan to "project-base" any tenant-based Section 8 vouchers in the coming year? If the answer is "no," go to the next component. If yes, answer the following questions. 1. Yes No: Are there circumstances indicating that the project basing of the units, rather than tenant-basing of the same amount of assistance is an appropriate option? If yes, check which circumstances apply: low utilization rate for vouchers due to lack of suitable rental units access to neighborhoods outside of high poverty areas other (describe below:) 2. Indicate the number of units and general location of units (e.g. eligible census tracts or smaller areas within eligible census tracts):

5. PHA Statement of Consistency with the Consolidated Plan

[24 CFR Part 903.15]

PHA Name: Southwest Acadia Housing Authority

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary) only if the PHA has provided a certification listing program or policy changes from its last Annual Plan submission.

1. Consolidated Plan jurisdiction:State of Louisiana

| 2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply) |
|--|
| The PHA has based its statement of needs of families on its waiting lists on the needs |
| expressed in the Consolidated Plan/s. |
| The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan. |
| The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan. |
| Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below) |
| Other: (list below) |
| 3. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below) |
| The PHA will continue to strive to meet the needs of the very low and low income |
| Families in its jurisdiction consistent with the needs addressed in the Consolidated Plan. |

<u>6. Supporting Documents Available for Review for Streamlined Annual PHA Plans</u>

PHAs are to indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

| List of Supporting Documents Available for Review | | | | | | | |
|---|---|--|--|--|--|--|--|
| Applicable & On Display | Supporting Document | Related Plan Component | | | | | |
| X | PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Standard Annual, Standard Five-Year, and Streamlined Five-Year/Annual Plans; | 5 Year and Annual Plans | | | | | |
| X | PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Streamlined Annual Plan | Streamlined Annual Plans | | | | | |
| N/A | Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan. | 5 Year and standard Annual Plans | | | | | |
| X | Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement. | 5 Year and Annual Plans | | | | | |
| X | Housing Needs Statement of the Consolidated Plan for the jurisdiction(s) in which the PHA is located and any additional backup data to support statement of housing needs for families on the PHA's public housing and Section 8 tenant-based waiting lists. | Annual Plan: Housing Needs | | | | | |
| X | Most recent board-approved operating budget for the public housing program | Annual Plan: Financial Resources | | | | | |
| X | Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP] and the Site-Based Waiting List Procedure. | Annual Plan: Eligibility, Selection, and Admissions Policies | | | | | |
| X | Deconcentration Income Analysis | Annual Plan: Eligibility, Selection, and Admissions Policies | | | | | |
| X | Any policy governing occupancy of Police Officers and Over-Income Tenants in Public Housing. ☑ Check here if included in the public housing A&O Policy. | Annual Plan: Eligibility, Selection, and Admissions Policies | | | | | |
| N/A | Section 8 Administrative Plan | Annual Plan: Eligibility, Selection, and Admissions Policies | | | | | |
| X | Public housing rent determination policies, including the method for setting public housing flat rents. Check here if included in the public housing A & O Policy. | Annual Plan: Rent Determination | | | | | |
| X | Schedule of flat rents offered at each public housing development. Check here if included in the public housing A & O Policy. | Annual Plan: Rent Determination | | | | | |
| N/A | Section 8 rent determination (payment standard) policies (if included in plan, not necessary as a supporting document) and written analysis of Section 8 payment standard policies. Check here if included in Section 8 Administrative Plan. | Annual Plan: Rent Determination | | | | | |
| X | Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation). | Annual Plan: Operations and Maintenance | | | | | |
| X | Results of latest Public Housing Assessment System (PHAS) Assessment (or other applicable assessment). | Annual Plan: Management and Operations | | | | | |
| N/A | Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if | Annual Plan: Operations and | | | | | |

| A | List of Supporting Documents Available for Review | Deleted Plan Comment | | |
|-------------------------------|---|---|--|--|
| Applicable & On Display | Supporting Document | Related Plan Component | | |
| | necessary) | Maintenance and Community Service & Self- Sufficiency | | |
| N/A | Results of latest Section 8 Management Assessment System (SEMAP) | Annual Plan: Management and Operations | | |
| N/A | Any policies governing any Section 8 special housing types Check here if included in Section 8 Administrative Plan | Annual Plan: Operations and Maintenance | | |
| X | Public housing grievance procedures ☐ Check here if included in the public housing A & O Policy | Annual Plan: Grievance Procedures | | |
| N/A | Section 8 informal review and hearing procedures. Check here if included in Section 8 Administrative Plan. | Annual Plan: Grievance Procedures | | |
| X | The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year. | Annual Plan: Capital Need | | |
| X | Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants. | Annual Plan: Capital Need | | |
| N/A | Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing. | Annual Plan: Capital Needs | | |
| N/A | Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. See PIH Notice 99-52 (HA). | Annual Plan: Capital Need | | |
| N/A | Approved or submitted applications for demolition and/or disposition of public housing. | Annual Plan: Demolition and Disposition | | |
| N/A | Approved or submitted applications for designation of public housing (Designated Housing Plans). | Annual Plan: Designation of Public Housing | | |
| N/A | Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937. | Annual Plan: Conversion of Public Housing | | |
| N/A | Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion. | Annual Plan: Voluntary Conversion of Public Housing | | |
| N/A | Approved or submitted public housing homeownership programs/plans. | Annual Plan: Homeownership | | |
| N/A | Policies governing any Section 8 Homeownership program (Sectionof the Section 8 Administrative Plan) | Annual Plan: Homeownership | | |
| X | Public Housing Community Service Policy/Programs ☐ Check here if included in Public Housing A & O Policy | Annual Plan: Community Service & Self-Sufficiency | | |
| N/A | Cooperative agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies. | Annual Plan: Community Service & Self-Sufficiency | | |
| N/A | FSS Action Plan(s) for public housing and/or Section 8. | Annual Plan: Community Service & Self-Sufficiency | | |
| X | Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing. | Annual Plan: Community Serice & Self -Sufficiency | | |
| N/A | Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports for public housing. | Annual Plan: Community Service & Self-Sufficiency | | |
| X | Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G). Check here if included in the public housing A & O Policy. | Annual Plan: Pet Policy | | |
| X | The results of the most recent fiscal year audit of the PHA conducted under the Single Audit Act as implemented by OMB Circular A-133, the results of that audit and the PHA's response to any findings. | Annual Plan: Annual Audi | | |
| N/A | Other supporting documents (optional) (list individually; use as many lines as necessary) | (specify as needed) | | |
| N/A | Consortium agreement(s) and for Consortium Joint PHA Plans Only: Certification that consortium agreement is in compliance with 24 CFR Part 943 | Joint Annual PHA Plan for Consortia: Agency | | |

| | List of Supporting Documents Available for Review | | | | | | |
|-------------------------------|---|---|--|--|--|--|--|
| Applicable & On Display | Supporting Document | Related Plan Component | | | | | |
| | pursuant to an opinion of counsel on file and available for inspection. | Identification and Annual Management and Operations | | | | | |

| PHA Name: Southwest Acadia Housing Authority | | Grant Type and Number Capital Fund Program Gr Replacement Housing Fac | Federal FY of Grant: 2008 | | | | |
|--|--|--|---------------------------------|-----------|--------------------------|--|--|
| | ual Statement □Reserve for Disasters/ Emergencies ☑Rev and Evaluation Report for Period Ending: □Final Pe | ised Annual Statemen erformance and Evalu | | | · | | |
| Line No. | Summary by Development Account | | mated Cost | Total Ac | Total Actual Cost | | |
| | | Original | Revised | Obligated | Expended | | |
| [| Total non-CFP Funds | | | | - | | |
|) | 1406 Operations | | | | | | |
| 3 | 1408 Management Improvements | | | | | | |
| 1 | 1410 Administration | | | | | | |
| 5 | 1411 Audit | | | | | | |
| <u> </u> | 1415 Liquidated Damages | | | | | | |
| 7 | 1430 Fees and Costs | | | | | | |
| 3 | 1440 Site Acquisition | | | | | | |
|) | 1450 Site Improvement | 12,000 | | | | | |
| 10 | 1460 Dwelling Structures | 59,270 | | | | | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | | | | | | |
| 12 | 1470 Nondwelling Structures | | | | | | |
| 13 | 1475 Nondwelling Equipment | 5,000 | | | | | |
| 14 | 1485 Demolition | | | | | | |
| 15 | 1490 Replacement Reserve | | | | | | |
| 16 | 1492 Moving to Work Demonstration | | | | | | |
| 17 | 1495.1 Relocation Costs | | | | | | |
| 18 | 1499 Development Activities | | | | | | |
| 19 | 1501 Collaterization or Debt Service | | | | | | |
| 20 | 1502 Contingency | | | | | | |
| 21 | Amount of Annual Grant: (sum of lines 2 – 20) | 76,270 | | | | | |
| 22 | Amount of line 21 Related to LBP Activities | | | | | | |
| 23 | Amount of line 21 Related to Section 504 compliance | | | | | | |
| 24 | Amount of line 21 Related to Security – Soft Costs | | | | | | |
| 25 | Amount of Line 21 Related to Security – Hard Costs | | | | | | |
| 26 | Amount of line 21 Related to Energy Conservation Measures | | | | | | |

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages

| PHA Name: Southwest Acadia Housing Authority | | Grant Type and Number Capital Fund Program Grant No: LA48P09150108 Replacement Housing Factor Grant No: | | | Federal FY of Gran | nt: 2008 | | |
|--|--|---|----------|----------------------|--------------------|--------------------|-------------------|-------------------|
| Development Number | General Description of Major Work Categories | Dev. Acct No. | Quantity | Total Estimated Cost | | Total Actual Cost | | Status of Work |
| Name/HA- | | | | | | | | |
| Wide | | | | | | | | |
| Activities | | | | | | | | |
| | | | | Original | Revised | Funds Obligated | Funds Expended | |
| PHA Wide | Landscaping | 1450 | | 10,000 | | | | |
| | Erosion Control pads | 1450 | | 2,000 | | | | |
| | Garage Awning (2) | 1475 | | 5,000 | | | | |
| | Toilet and Lav. Replacement (24 | 1460 | | 20,000 | | | | |
| | Tub faucet replacement | 1460 | | 44,270 | | | | |
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| TIOUSING TUCTOT | | | | | | | |
|-----------------------|----------------|--------------|--------------|-----------------------------------|-----------------|------------|----------------------------------|
| Annual Statement | | | | | | | |
| Capital Fund Prog | gram and | Capital F | und Prog | ram Replac | ement Hous | ing Factor | (CFP/CFPRHF) |
| Part III: Impleme | entation S | chedule | | | | | |
| PHA Name: Southwest A | Acadia Housing | | Type and Nur | | 1100 | | Federal FY of Grant: 2008 |
| Replacement House | | | | m No: LA48P09150 ng Factor No: | 0108 | | |
| Development | All | Fund Obliga | | | Funds Expende | ed | Reasons for Revised Target Dates |
| Number | (Quar | ter Ending I | Date) | (Qua | arter Ending Da | ite) | |
| Name/HA-Wide | | | | | | | |
| Activities | | T | T | | | 1 | |
| | Original | Revised | Actual | Original | Revised | Actual | |
| PHA Wide | 9/30/10 | | | 9/30/12 | | | |
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| Capital Fund P | rogram Fiv | ve-Year Action Plan | | | |
|--|---------------------|------------------------------|----------------------------|---------------------------------------|------------------------------|
| Part I: Summan | | | | | |
| PHA Name Southwe Housing Authority | st Acadia | | | ☐Original 5-Year Plan ☐Revision No: 1 | 1 |
| Development Number/Name/ HA-Wide | Year 1 | Work Statement for Year 2 | Work Statement for Year 3 | Work Statement for Year 4 | Work Statement for Year 5 |
| | | FFY Grant: PHA FY:2009 | FFY Grant: PHA FY: 2010 | FFY Grant: PHA FY: 2011 | FFY Grant: PHA FY: 2012 |
| | Annual Statement | | | | |
| PHA Wide | | 76,270 | 76,270 | 76,270 | 264,600 |
| | | | | | |
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| | | | | | |
| | | | | | |
| CFP Funds Listed for 5-year planning | | 76,270 | 76,270 | 76,270 | 264,600 |
| Replacement Housing Factor Funds | | | | | |

| Capital Fu | nd Program Five- | Year Action Plan | | | | | | |
|-------------|---------------------|---------------------------|-----------------------|----------------------------|----------------------|-----------|--|--|
| Part II: Su | pporting Pages—\ | Work Activities | | | | | | |
| Activities | Acti | vities for Year :_2009_ | | Activities for Year: _2010 | | | | |
| for | | FFY Grant: | | | FFY Grant: | | | |
| Year 1 | | PHA FY: | 1 | | PHA FY: | T | | |
| | Development | Major Work | Estimated Cost | Development | Major Work | Estimated | | |
| | Name/Number | Categories | | Name/Number | Categories | Cost | | |
| See | PHA Wide | Fees & Cost | 8,000 | PHA Wide | Kitchen Cabinets | 26,270 | | |
| Annual | | Kitchen Cabinets | 3,673 | | Toilets & Lavatories | 50,000 | | |
| Statement | | Toilets & Lav replacement | 50,000 | | | | | |
| | | Attic Insulation | 14,597 | | | | | |
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| | | | | | | | | |
| | Total CFP Estimated | d Cost | \$76,270 | | | \$76,270 | | |

| Capital Fund Prog | | | | | | | |
|--------------------|--|-----------------------|--|------------------------|-----------------------|--|--|
| Part II: Supportin | ig Pages—Work Activities for Year :_201 | | Activities for Year: _2012 FFY Grant: | | | | |
| 71 | FFY Grant: | 1 | | | | | |
| | PHA FY: | | | PHA FY: | | | |
| Development | Major Work | Estimated Cost | Development | Major Work | Estimated Cost | | |
| Name/Number | Categories | | Name/Number | Categories | | | |
| PHA Wide | Fees & Cost | 8,000 | PHA Wide | Fees & Cost | 8,000 | | |
| | Paint Units | 63,270 | | Marble Tub Surround | 12,000 | | |
| | Kitchen Cabinets | 5,000 | | Replace GFI's | 6,000 | | |
| | | | | Storage Buildings | 54,000 | | |
| | | | | Window Locks | 2,000 | | |
| | | | | Paint Buildings | 80,000 | | |
| | | | | Replace Roofs | 108,000 | | |
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| | | | | | | | |
| Total CFP Es | stimated Cost | \$76,270 | | | \$264,600 | | |

| | • | Replacement Housing | Grant No: LA48P09150 Factor Grant No: | 0105 | Federal FY of Grant: 2005 |
|----------|---|--|--|-----------|---------------------------------|
| | ual Statement Reserve for Disasters/ Emergencies Rev and Evaluation Report for Period Ending: Final Po | ised Annual Statem erformance and Eva | | | · |
| Line No. | Summary by Development Account | Total Es | stimated Cost | Total A | Actual Cost |
| | | Original | Revised | Obligated | Expended |
| | Total non-CFP Funds | | | | |
| 2 | 1406 Operations | | | | |
| 3 | 1408 Management Improvements | | | | |
| ļ | 1410 Administration | | | | |
| 5 | 1411 Audit | | | | |
| 5 | 1415 Liquidated Damages | | | | |
| 7 | 1430 Fees and Costs | 7,400 | 5,690 | 5,690 | 5,690 |
| 3 | 1440 Site Acquisition | | | | |
|) | 1450 Site Improvement | | | | |
| 10 | 1460 Dwelling Structures | 65,730 | 67,440 | 67,440 | 67,440 |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | | | | |
| 12 | 1470 Nondwelling Structures | | | | |
| 13 | 1475 Nondwelling Equipment | | | | |
| 14 | 1485 Demolition | | | | |
| 15 | 1490 Replacement Reserve | | | | |
| 16 | 1492 Moving to Work Demonstration | | | | |
| 17 | 1495.1 Relocation Costs | | | | |
| 18 | 1499 Development Activities | | | | |
| 19 | 1501 Collaterization or Debt Service | | | | |
| 20 | 1502 Contingency | | | | |
| 21 | Amount of Annual Grant: (sum of lines 2 – 20) | 73,130 | 73,130 | 73,130 | 73,130 |
| 22 | Amount of line 21 Related to LBP Activities | | | | |
| 23 | Amount of line 21 Related to Section 504 compliance | | | | |
| 24 | Amount of line 21 Related to Security – Soft Costs | | | | |
| 25 | Amount of Line 21 Related to Security – Hard Costs | | | | |
| 26 | Amount of line 21 Related to Energy Conservation Measures | | | | |

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages

| | hwest Acadia Housing Authority | Grant Type and Capital Fund Pr Replacement H | | LA48P09150105 ant No: | | Federal FY of Gra | nt: 2005 | |
|---|---|--|----------|--------------------------|-----------|--------------------|-------------------|------|
| Development Number Name/HA- Wide Activities | General Description of Major Work Categories | Dev. Acct No. | Quantity | Total Estimated Cost | | Total Act | Status of Work | |
| | | | | Original | Revised | Funds Obligated | Funds Expended | |
| PHA Wide | Fees & Cost | 1430 | | 7,400 | 5,690 | 5,690 | 5,690 | 100% |
| | A/C Units | 1460 | | 65,730 | 53,383.94 | 67,440 | 53,383.94 | 100% |
| | Replace front doors | 1460 | | | 14,056.06 | 73,130 | 73,130 | 100% |
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| Annual Statement | | | | - | | | |
| Capital Fund Pro | gram and | Capital F | und Prog | ram Replac | ement Hous | ing Factor | (CFP/CFPRHF) |
| Part III: Impleme | entation S | chedule | | | | | |
| PHA Name: Southwest Acadia Housing Authority Grant Type and Nu Capital Fund Progra Replacement Housin | | | n No: LA48P09150 | 0105 | | Federal FY of Grant: 2005 | |
| Development | All | Fund Obliga | ited | All | Funds Expend | ed | Reasons for Revised Target Dates |
| Number Name/HA-Wide | (Quar | ter Ending I | Date) | (Qua | arter Ending Da | ate) | |
| Activities | | | _ | | | | |
| | Original | Revised | Actual | Original | Revised | Actual | |
| PHA Wide | 9/30/07 | | 03/30/2007 | 9/30/09 | | 09/30/2007 | |
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| | Ç Ç | Grant Type and Number Capital Fund Program Grant No: LA48P09150106 Replacement Housing Factor Grant No: | | | | |
|----------|--|---|----------------------------|-----------|-------------|--|
| | al Statement Reserve for Disasters/ Emergencies Rev | | | | | |
| Line No. | nd Evaluation Report for Period Ending: ⊠Final Perform Summary by Development Account | | on Report stimated Cost | Total | Actual Cost | |
| Line No. | Summary by Development Account | Original | Revised | Obligated | Expended | |
| 1 | The Land Company of the La | Original | Keviseu | Obligated | Expended | |
| 1 | Total non-CFP Funds | | | | | |
| 2 | 1406 Operations | | | | | |
| 3 | 1408 Management Improvements | | | | | |
| 4 | 1410 Administration | | | | | |
| 5 | 1411 Audit | | | | | |
| 6 | 1415 Liquidated Damages | | | | | |
| 7 | 1430 Fees and Costs | 7,500 | 0 | | | |
| 8 | 1440 Site Acquisition | | | | | |
| 9 | 1450 Site Improvement | 51,097 | 26,235 | 26,235 | 26,235 | |
| 10 | 1460 Dwelling Structures | 12,000 | 44,362 | 44,362 | 44,362 | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | | | | | |
| 12 | 1470 Nondwelling Structures | | | | | |
| 13 | 1475 Nondwelling Equipment | | | | | |
| 14 | 1485 Demolition | | | | | |
| 15 | 1490 Replacement Reserve | | | | | |
| 16 | 1492 Moving to Work Demonstration | | | | | |
| 17 | 1495.1 Relocation Costs | | | | | |
| 18 | 1499 Development Activities | | | | | |
| 19 | 1501 Collaterization or Debt Service | | | | | |
| 20 | 1502 Contingency | | | | | |
| 21 | Amount of Annual Grant: (sum of lines 2 – 20) | 68,571 | 70,597 | 70,597 | 70,597 | |
| 22 | Amount of line 21 Related to LBP Activities | | | | | |
| 23 | Amount of line 21 Related to Section 504 compliance | | | | | |
| 24 | Amount of line 21 Related to Security – Soft Costs | | | | | |
| 25 | Amount of Line 21 Related to Security – Hard Costs | | | | | |
| 26 | Amount of line 21 Related to Energy Conservation Measures | | | | | |

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages

| hwest Acadia Hosing Authority | Capital Fund Pr | rogram Grant No: | : LA48P09150106 ant No: | | Federal FY of Gran | nt: 2006 | |
|---|---|--|--|--|---|--|--|
| General Description of Major Work Categories | Dev. Acct No. | Quantity | Total Estimated Cost | | Total Actual Cost | | Status of Work |
| | | | | | | | |
| | Original Revised | | Funds Obligated | Funds Expended | | | |
| Fees & Cost | 1430 | | \$7,500 | 0 | 0 | | |
| Parking | 1450 | | \$35,071 | \$26,235 | \$26,235 | \$26,235 | |
| Landscaping | 1450 | | \$14,000 | 0 | 0 | | |
| Washing Machine Boxes | 1460 | | \$12,000 | \$12,000 | \$12,000 | \$12,000 | |
| Front door replacement | 1460 | | 0 | \$22,362 | \$22,362 | \$22,362 | |
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| - | General Description of Major Work Categories Fees & Cost Parking Landscaping Washing Machine Boxes | Fees & Cost Parking Landscaping Washing Machine Boxes Grant Type an Capital Fund Pr Replacement H Dev. Acct No. 1430 1450 Landscaping 1450 Washing Machine Boxes 1460 | Fees & Cost Parking Landscaping Washing Machine Boxes Parking Pa | Armount of the second state of the second stat | Acadia Hosing Authority Grant Type and Number Capital Fund Program Grant No: LA48P09150106 Replacement Housing Factor Grant No: General Description of Major Work Categories No. Dev. Acct No. Original Revised Fees & Cost 1430 \$7,500 0 Parking 1450 \$35,071 \$26,235 Landscaping 1450 \$14,000 0 Washing Machine Boxes 1460 \$12,000 \$12,000 | Acadia Hosing Authority Grant Type and Number Capital Fund Program Grant No: LA48P09150106 Replacement Housing Factor Grant No: Dev. Acct No. Original Federal FY of Grant Total Act Obligated Fees & Cost 1430 Fees & Cost Parking 1450 Fees & Cost Landscaping 1450 Washing Machine Boxes Federal FY of Grant Federal FY of Grant Federal FY of Grant Federal FY of Grant Feederal FY of Grant Total Act Original Sequence Sequ | Acadia Hosing Authority Grant Type and Number Capital Fund Program Grant No: LA48P09150106 Replacement Housing Factor Grant No: |

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule Grant Type and Number Federal FY of Grant: 2006 PHA Name: Southwest Acadia Capital Fund Program No: LA48O09150106 **Housing Authority** Replacement Housing Factor No: All Funds Expended Development All Fund Obligated Reasons for Revised Target Dates Number (Quarter Ending Date) (Quarter Ending Date) Name/HA-Wide Activities Original Revised Original Revised Actual Actual 9/30/2008 9/30/2010 12/30/2008 12/30/200 8

| | | Grant Type and Number Capital Fund Program Grant No: LA48P09150107 Replacement Housing Factor Grant No: | | | | |
|----------|---|---|-------------------|-----------|-----------|--|
| | al Statement Reserve for Disasters/ Emergencies Rev | | ` , | | | |
| Line No. | and Evaluation Report for Period Ending: 06/30/2008 Find Summary by Development Account | | Evaluation Report | Total Ac | tual Cost | |
| | Saintary by 20,000 printer 12000 and | Original | Revised | Obligated | Expended | |
| 1 | Total non-CFP Funds | 8 | | 8 | • | |
| 2 | 1406 Operations | | | | | |
| 3 | 1408 Management Improvements | | | | | |
| 4 | 1410 Administration | | | | | |
| 5 | 1411 Audit | | | | | |
| 6 | 1415 Liquidated Damages | | | | | |
| 7 | 1430 Fees and Costs | 8,000 | | | | |
| 8 | 1440 Site Acquisition | , | | | | |
| 9 | 1450 Site Improvement | | | | | |
| 10 | 1460 Dwelling Structures | 41,262 | | | | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | | | | | |
| 12 | 1470 Nondwelling Structures | | | | | |
| 13 | 1475 Nondwelling Equipment | 23,000 | | | | |
| 14 | 1485 Demolition | | | | | |
| 15 | 1490 Replacement Reserve | | | | | |
| 16 | 1492 Moving to Work Demonstration | | | | | |
| 17 | 1495.1 Relocation Costs | | | | | |
| 18 | 1499 Development Activities | | | | | |
| 19 | 1501 Collaterization or Debt Service | | | | | |
| 20 | 1502 Contingency | | | | | |
| 21 | Amount of Annual Grant: (sum of lines 2 – 20) | 72,262 | | | | |
| 22 | Amount of line 21 Related to LBP Activities | | | | | |
| 23 | Amount of line 21 Related to Section 504 compliance | | | | | |
| 24 | Amount of line 21 Related to Security – Soft Costs | | | | | |
| 25 | Amount of Line 21 Related to Security – Hard Costs | | | | | |
| 26 | Amount of line 21 Related to Energy Conservation Measures | | | | | |

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages

| PHA Name: South | hwest Acadia Hosing Authority | Grant Type and Capital Fund Pr Replacement H | d Number ogram Grant No: ousing Factor Gra | LA48P09150107 ant No: | | Federal FY of Gra | Federal FY of Grant: 2007 | | |
|---|---|--|--|--------------------------|---------|--------------------|---------------------------|--|--|
| Development Number Name/HA- Wide Activities | General Description of Major Work Categories | Dev. Acct No. | Quantity | Total Estimated Cost | | Total Act | Status of Work | | |
| | | | | Original | Revised | Funds Obligated | Funds Expended | | |
| PHA Wide | Fees & Cost | 1430 | | 8,000 | | | - | | |
| | Replace Front Doors | 1460 | | 41,262 | | | 19,469.74 | | |
| | Maintenance Vehicle | 1475 | | 23,000 | | 21,429.50 | 21,429.50 | | |
| | Office Canopy | 1470 | | 0 | 5,000 | 3,246.31 | 3,246.31 | | |
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Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) **Part III: Implementation Schedule Grant Type and Number** Federal FY of Grant: 2007 PHA Name: Southwest Acadia Capital Fund Program No: LA48O09150107 **Housing Authority** Replacement Housing Factor No: Development All Fund Obligated All Funds Expended Reasons for Revised Target Dates Number (Quarter Ending Date) (Quarter Ending Date) Name/HA-Wide Activities Revised Original Revised Original Actual Actual 9/30/2009 9/30/2011

Attacvhment1. Violence against Women Act:

The Southwest Acadia Consolidated Housing Authority will protect victims of criminal domestic violence, dating violence. Sexual assault or stalking: as well as members of the victims' immediate families from losing their HUD assisted housing as a consequence of the abuse of which they were victim.